

# Morrisville Health District

## 2012 Behavioral Risk Factor Surveillance System Data

*Guidance • Support • Prevention • Protection*

VDH – Public Health Statistics  
May 2014

 **VERMONT**  
**DEPARTMENT OF HEALTH**

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## What is the Behavioral Risk Factor Surveillance System or BRFSS?

The Behavioral Risk Factor Surveillance System (BRFSS) is a telephone survey conducted annually among adults 18 and older. The Vermont BRFSS is conducted by the Vermont Department of Health (VDH) in collaboration with the Centers for Disease Control and Prevention (CDC). All U.S. states, Washington D.C. and several U.S. territories participate in the survey.

Typically between 6,000 and 7,000 Vermont adults are interviewed as part of the Vermont BRFSS each year. Vermont residents ages 18 and older are eligible for the survey. A Vermont resident is defined as someone living in the state for at least 30 days in a given calendar year. Adults living in institutions such as nursing homes, group homes, or prisons are not eligible for the survey.

The BRFSS survey includes questions on chronic disease prevalence (e.g. asthma diagnosis), risk behaviors (e.g. currently smoke), demographics (e.g. age, gender, race), health care access (e.g. have health insurance), and preventive behaviors and health screening (e.g. routine visits to a doctor or colorectal cancer screening).

Additional information can be found on the VDH and CDC websites:

- <http://healthvermont.gov/research/brfss.aspx>
- <http://www.cdc.gov/brfss/>

A report summarizing the 2012 statewide results from the Vermont BRFSS can also be found on the VDH website:

[http://healthvermont.gov/research/brfss/documents/summary\\_brfss\\_2012.pdf](http://healthvermont.gov/research/brfss/documents/summary_brfss_2012.pdf)

### Recent Changes to BRFSS Methodology

In 2011, the CDC implemented changes to the BRFSS weighting methodology in order to more accurately represent the adult population. Population weights are now calculated using iterative proportional fitting (or “raking”) methodology. This allows the weights to be calculated using smaller sample sizes, adjusts for more demographic variables, and incorporates cell phone interview data into estimates.

While these adjustments make the calculations more representative of the population, the changes in methodology also limit the ability to compare 2011 results to previous years. VDH’s Center for Health Statistics recommends that comparisons between 2011 BRFSS data and earlier years be made with caution. Statistical differences between 2011 and earlier years may be due to methodological changes, rather than changes in opinion or behavior.

## Demographics of Morrisville Health District\*

The next few pages describe the demographic makeup of Morrisville area adults in 2011-2012.

More than half of Morrisville adults are female. About seven of ten adult Morrisville residents are 25-64, with less than one in five ages 65 and older.

- Morrisville adults report a similar age distribution as those in Vermont overall.

More than four in ten Morrisville area adults has a high school degree or less, while about three in ten has a college degree or higher.

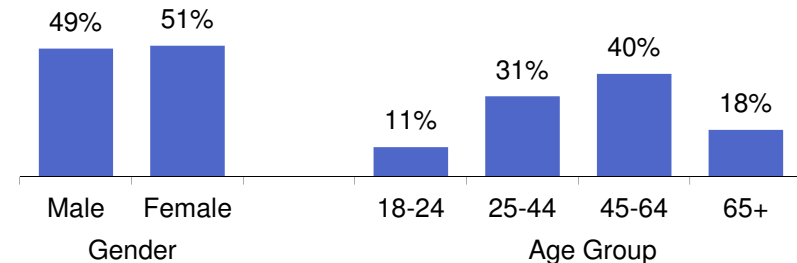
- Morrisville adults report a similar education distribution as those in Vermont overall.

A quarter of Morrisville adults live in a home making less than \$25,000 annually and about four in ten live in homes making \$50,000 or more per year.

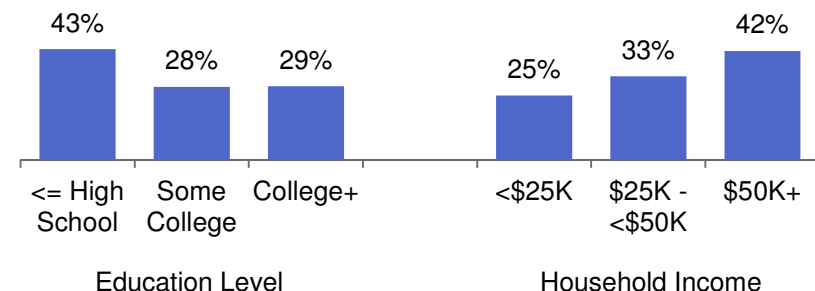
- There are no statistical differences between Morrisville adults and Vermont adults by annual income level.

Four percent of adults in the Morrisville area report being a racial or ethnic minority. This is statistically similar to the five percent reported among Vermont adults overall.

**Morrisville Residents  
by Gender and Age**



**Morrisville Residents  
by Socio-Economic Status**



\*See page 27 for a list of the towns included in the Morrisville Health District.

## Demographics of Morrisville Health District

Roughly six in ten Morrisville adult residents are currently employed, while more than one in seven is retired. Ten percent or fewer each said they are a student or homemaker, unemployed, or unable to work.

- Morrisville area adults reported a similar employment distribution to Vermont adults overall.

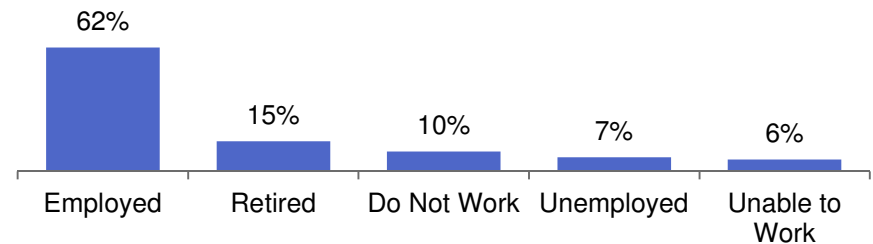
More than half of Morrisville adults are married. About one in five have never married and one in seven is divorced. Six percent or fewer each are widowed or part of an unmarried couple.

- Adults in the Morrisville area reported similar rates by marital status, as compared with Vermont adults overall.

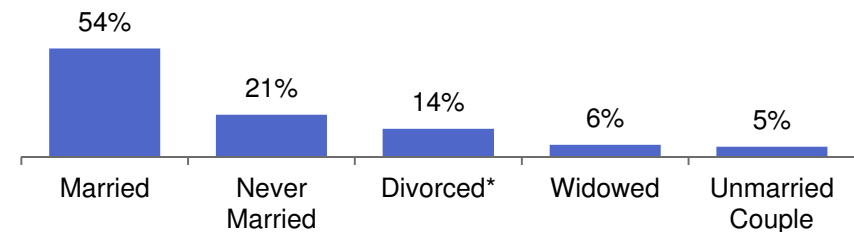
More than two-thirds of adults in the Morrisville area said there are no children less than 18 in their home. Three percent reported having three or more children.

- The number of children in the home reported by Morrisville area adults was similar to that for Vermont overall.

**Morrisville Residents  
by Employment Status**

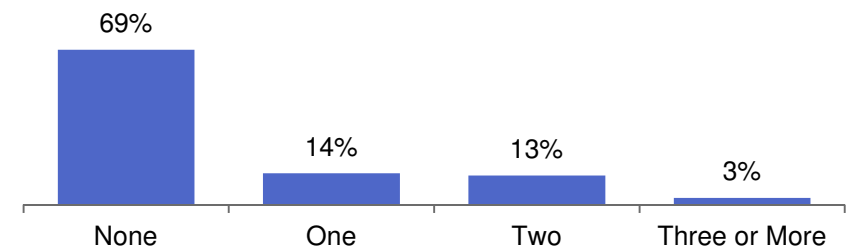


**Morrisville Residents  
by Marital Status**



\*Includes those who reported their marital status as divorced or separated.

**Morrisville Residents  
by Children in Household**

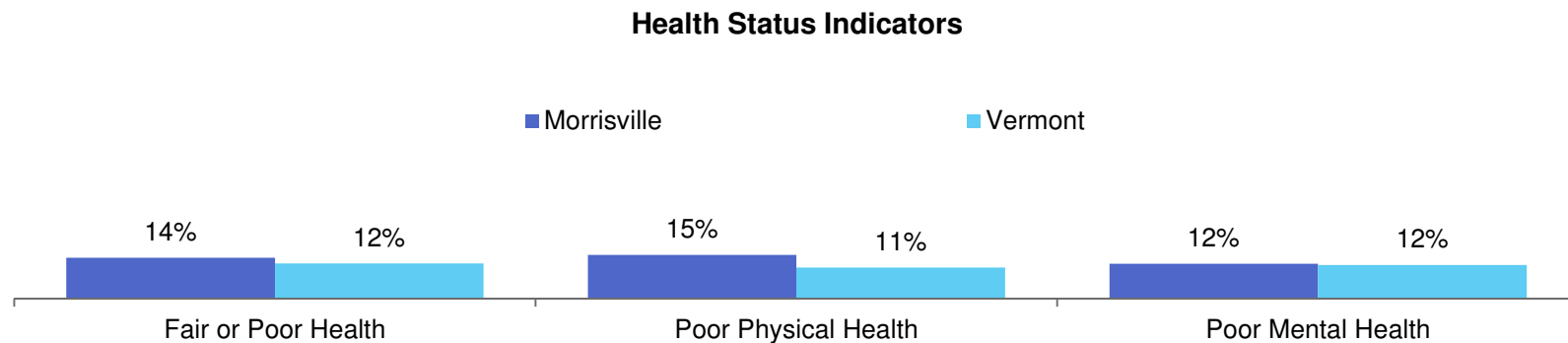


## Health Status Indicators

In 2011-2012, one in seven Morrisville area adults reported being in fair or poor general health. Slightly more, 15%, reported having poor physical health, while 12% said they had poor mental health.

- Poor mental and physical health were defined as 14 or more days of poor mental/physical health in the last month.

There are no statistically significant differences in health status, regardless of the measure, when comparing Morrisville area adults and Vermont adults overall.



# Health Status Indicators

Rates of fair or poor general health, poor physical health and poor mental health do not differ significantly by gender among Morrisville area adults.

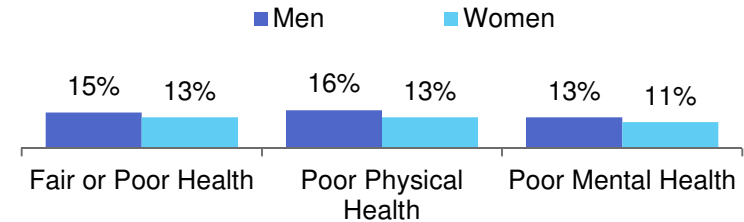
Morrisville area adults 65 and older reported significantly lower rates of poor mental health compared with younger adults.

There are no statistical differences in fair or poor general health and poor physical health by age.

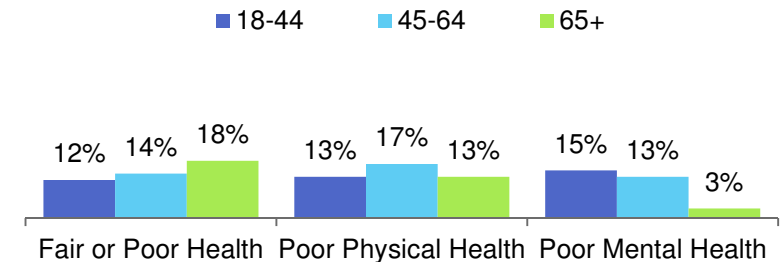
Poor health, regardless of the measure decreases with increasing annual household income.

- Adults in homes making less than \$25,000 per year are significantly more likely than those with more income to report fair or poor general health and poor physical health.
- Adults in homes with the highest annual household incomes are significantly less likely to report poor mental health than those with less income.

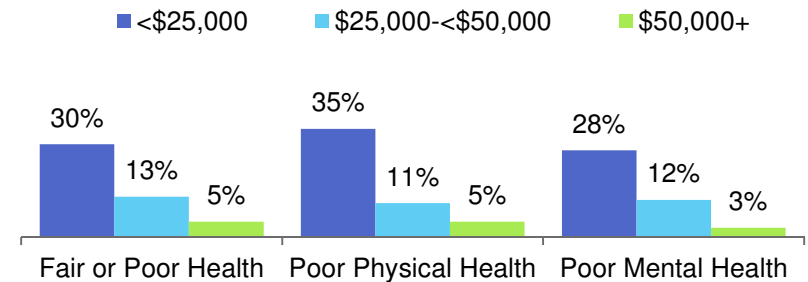
**Health Status Indicators by Gender  
Morrisville Adults**



**Health Status Indicators by Age**



**Health Status Indicators by Income Level**

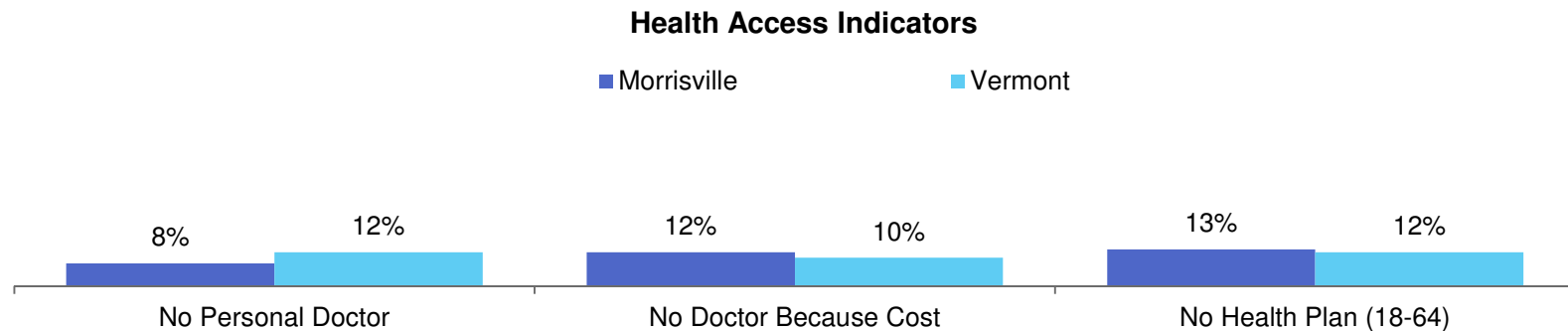


## Health Access Indicators

In 2011-2012, one in twelve adults in the Morrisville area said they do not have a personal doctor for health care. This is a significantly lower rate than the 12% reported among Vermont adults.

One in eight Morrisville area adults said they needed care in the last year but did not seek it due to the cost. Among adults ages 18-64, 13% said they do not have health insurance.

There are no differences in delaying care and not having a health plan when comparing Morrisville adults with Vermont adults overall.



## Health Access Indicators

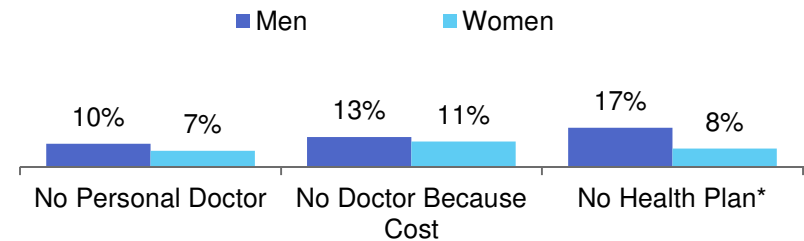
There are no statistically significant differences by gender in any health access measure, among Morrisville area adults.

Not having a personal doctor, delaying care due to cost, and not having a health plan all decrease with increasing age. However, none of the differences by age are statistically significant.

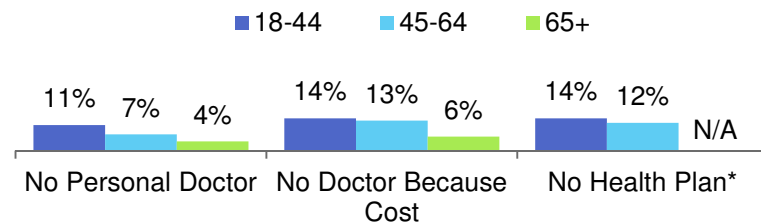
Adults in the Morrisville area who have higher annual household incomes are less likely to report poor health access, regardless of the measure.

- Adults in homes making \$50,000 or more are significantly less likely than those in homes making less than \$25,000 to delay care (5% vs. 26%) and not have a health plan (5% vs. 27%).
- Not having a personal doctor does not vary statistically by annual household income.

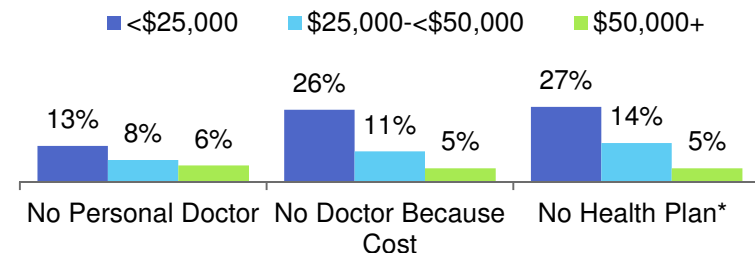
**Health Access Indicators by Gender  
Morrisville Adults**



**Health Access Indicators by Age**



**Health Access Indicators by Income Level**



\*Limited to adults 18-64.

## Disability

Less than a quarter of Vermont adults reported having a disability (21%) in 2012, which is statistically similar to the 28% reported among adults in the Morrisville area.

- Disability was defined as having activity limitations due to physical, emotional or mental problems OR any health problem that requires use of special equipment.

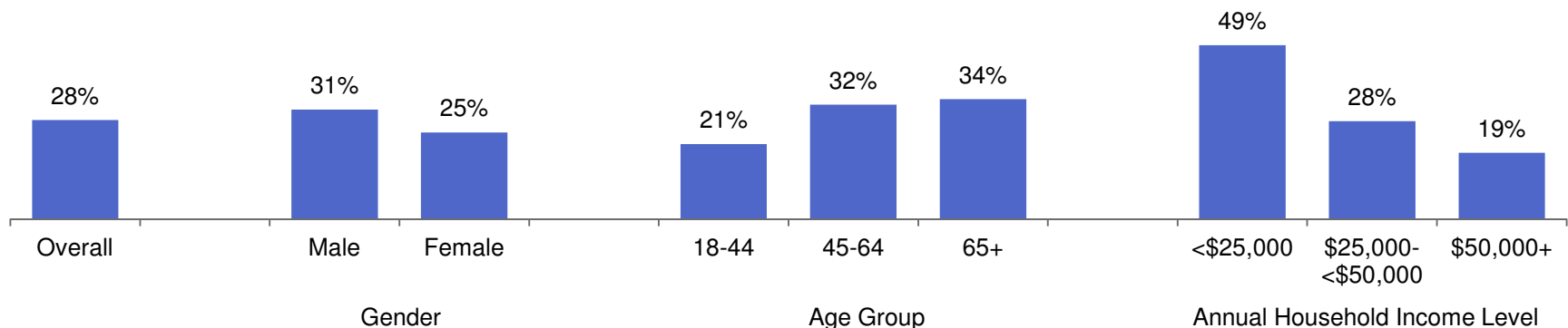
Men and women in the Morrisville area report being disabled at the statistically similar rates.

Reported disability among Morrisville adults increases with increasing age, however, none of the differences are statistically significant.

Morrisville area adults with lower annual household incomes are more likely to be disabled.

- Those in homes making less than \$25,000 per year are significantly more likely to report a disability than those in homes making \$50,000 or more (49% vs. 19%).

**Disability, Overall and by Sub-groups  
Morrisville Adults**

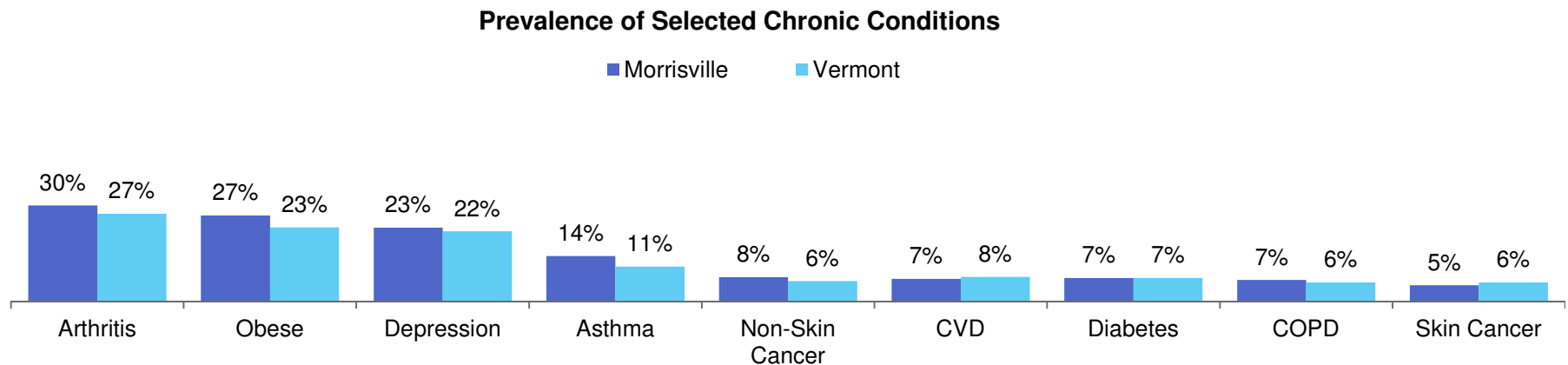


## Chronic Conditions

Three in ten Morrisville area adults reported having arthritis. Fewer, about a quarter (27%), are obese, while less than a quarter (23%) have ever been diagnosed with a depressive disorder.

One in seven adults have asthma and less than ten percent each reported having a non-skin cancer, cardiovascular disease (CVD), diabetes, chronic obstructive pulmonary disease (COPD), and skin cancer.

Morrisville adults reported similar rates of all following chronic conditions, regardless of the measure, as compared with Vermont adults overall.



CVD = cardiovascular disease

Obesity data is limited to adults 20 and older and is age-adjusted to the U.S. 2000 population.

# Chronic Conditions

Morrisville area women are significantly more likely than men to report having a depressive disorder (31% vs. 14%).

There are no statistically significant differences by gender in the prevalence of arthritis, obesity, and asthma.

Arthritis prevalence among Morrisville adults increases with increasing age.

- All differences by age are statistically significant.

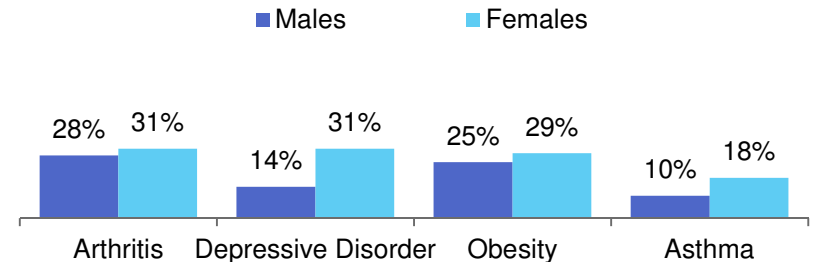
Older adults, those 65 and older, are statistically less likely to report a depressive disorder than those 45 to 64.

There are no differences by age in obesity and asthma prevalence.

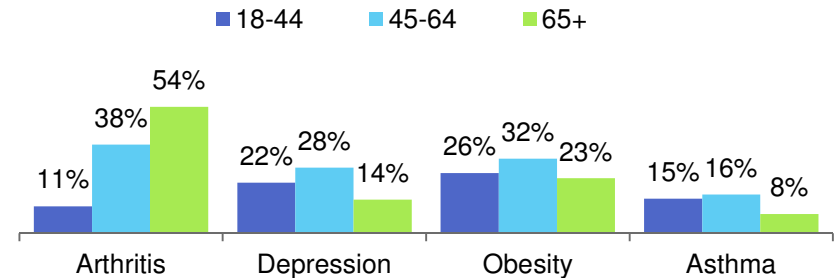
The prevalence of arthritis, depressive disorders, obesity, and asthma among Morrisville adults all decrease as reported annual household income increases.

- Adults in homes making \$25,000 or more annually are significantly less likely than those with incomes of less than \$25,000 to report arthritis.
- Likewise, those in homes making \$50,000 or more are less likely than those with an income of less than \$25,000 to report a depressive disorder (13% vs. 38%).
- Differences in obesity and asthma prevalence are not statistically significant.

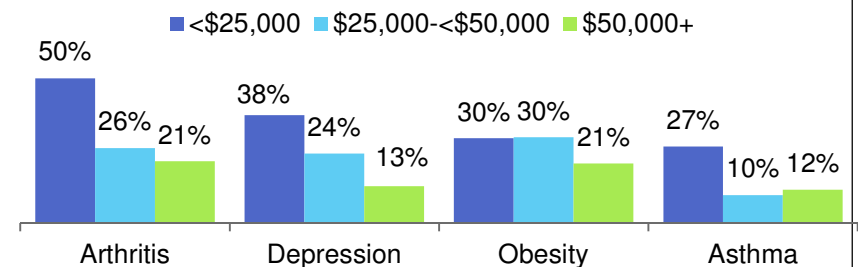
**Chronic Conditions by Gender  
Morrisville Adults**



**Chronic Conditions by Age**



**Chronic Conditions by Income Level**



Note: Obesity data are for adults 20 and, except that by age, are age adjusted to U.S. 2000 standard population.

## Chronic Conditions

There are no statistically significant differences by gender in the prevalence of cardiovascular disease, diabetes, and COPD among Morrisville area adults.

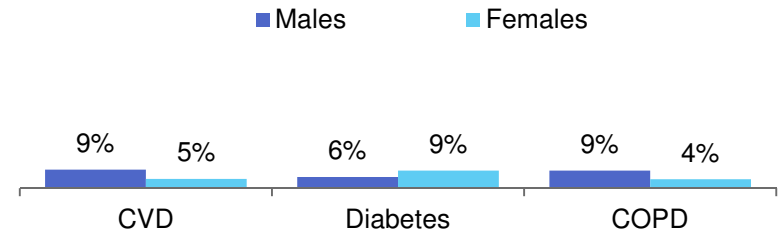
Reported cardiovascular disease and diabetes are highest among adults 65 and older, however, differences by age are not statistically significant.

There are also no statistical differences by age in the prevalence of COPD.

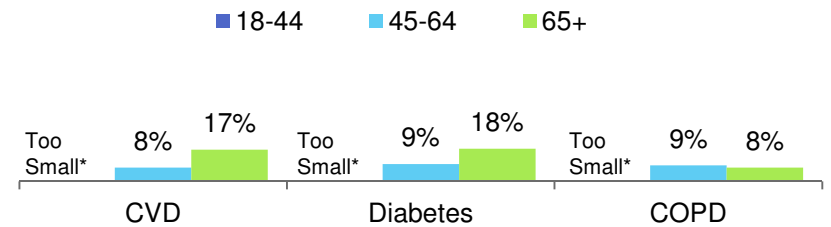
Morrisville area adults living in homes with less income are more likely to say they have a cardiovascular disease, diabetes, and COPD.

- Those in homes making less than \$25,000 per year are significantly more likely than those with more income to report having COPD.
- Differences in cardiovascular disease and diabetes by annual household income level are not statistically significant.

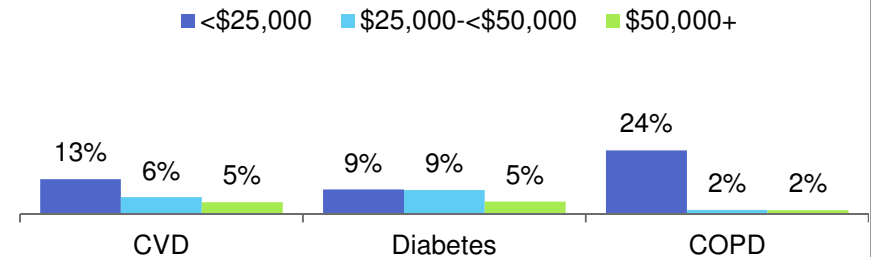
**Chronic Conditions by Gender  
Morrisville Adults**



**Chronic Conditions by Age**



**Chronic Conditions by Income Level**



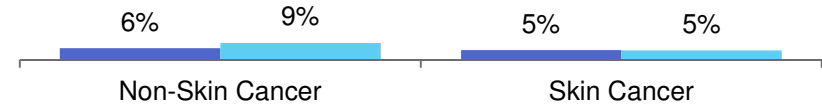
\*Sample size is too small to report

## Chronic Conditions

Among Morrisville area adults, there are no statistical differences by gender, age, or annual household income level in the prevalence of either non-skin cancer and skin cancer.

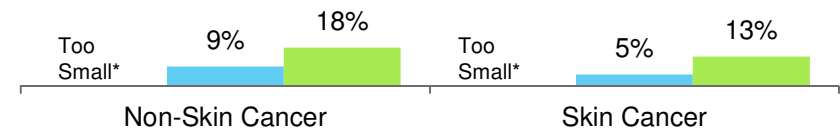
### Chronic Conditions by Gender Morrisville Adults

■ Males ■ Females



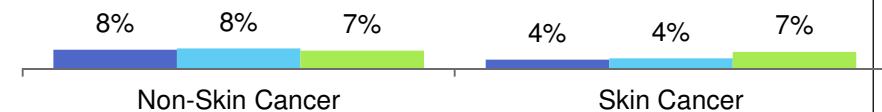
### Chronic Conditions by Age

■ 18-44 ■ 45-64 ■ 65+



### Chronic Conditions by Income Level

■ <\$25,000 ■ \$25,000-<\$50,000 ■ \$50,000+



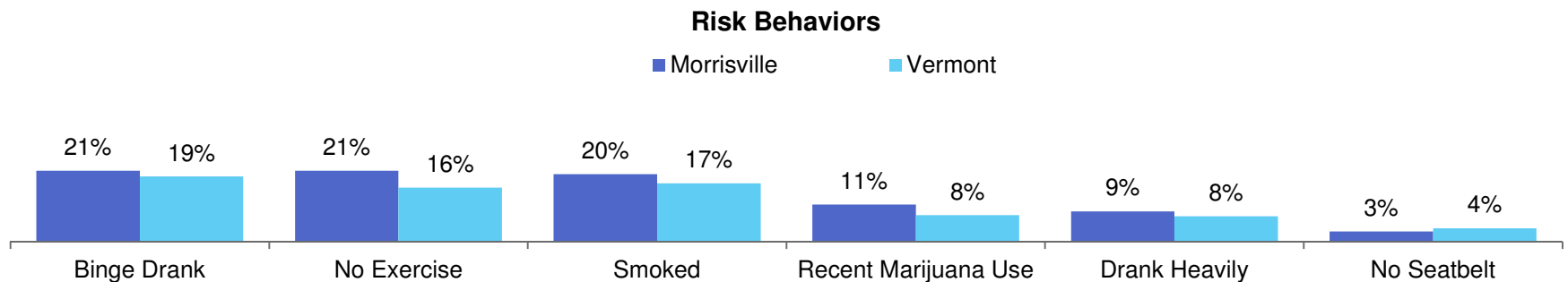
\*Sample size is too small to report

## Risk Behaviors

In 2011-2012, about one in five (21%) Morrisville adults said they did not participate in physical activity during the last month. A similar proportion, 20%, said they currently smoke. Among smokers, half reported trying to quit at least once during the past year.

Twenty-one percent of Morrisville adults said they binge drank during the previous month. Fewer, one in eleven, heavily drank during that time. One in nine recently used marijuana, while three percent said they seldom or never wear a seatbelt.

There are no statistical differences in any risk behavior measure, when comparing Morrisville adults and Vermont adults overall.



Note: Smoking and exercise data are age adjusted to the U.S. 2000 standard population

## Risk Behaviors

There are no statistically significant differences by gender among Morrisville area adults in smoking and not participating in physical activity.

Among adults in the Morrisville area, smoking rates decrease with increasing age.

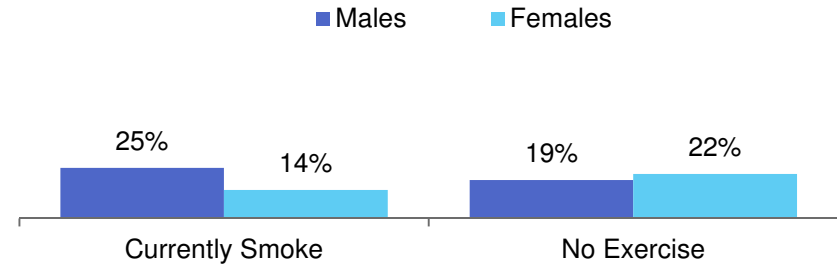
- Adults 18-64 are significantly more likely to report smoking than those 65 and older.

Conversely, not participating in physical activity increases with increasing age. However, differences by age are not statistically significant.

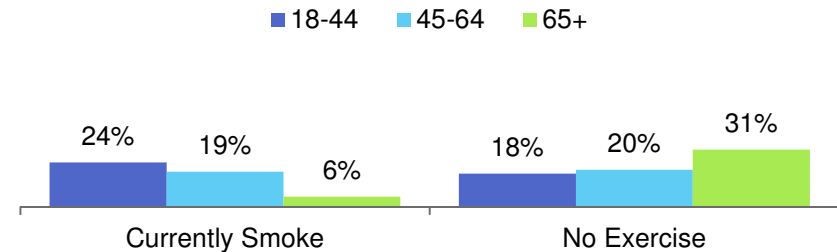
Morrisville area adults in homes with more income are less likely to currently smoke and less likely to not participate in physical activity.

- Adults in homes making \$50,000 or more are significantly less likely than those in homes with less income to smoke and not participate in physical activity.

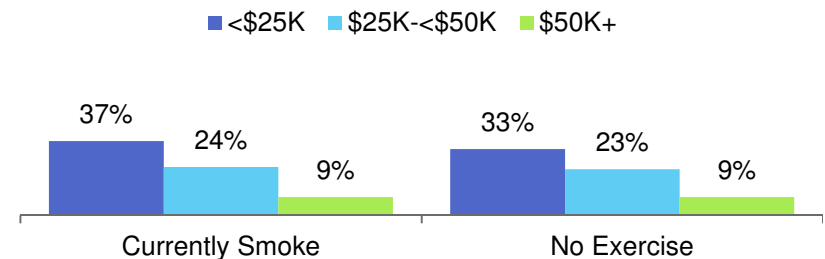
**Risk Behaviors by Gender  
Morrisville Adults**



**Risk Behaviors by Age**



**Risk Behaviors by Income Level**



Note: smoking and physical activity data, except that by age, are age-adjusted to the U.S. 2000 population.

## Risk Behaviors

There are no significant differences by gender in binge drinking or heavy drinking among Morrisville area adults.

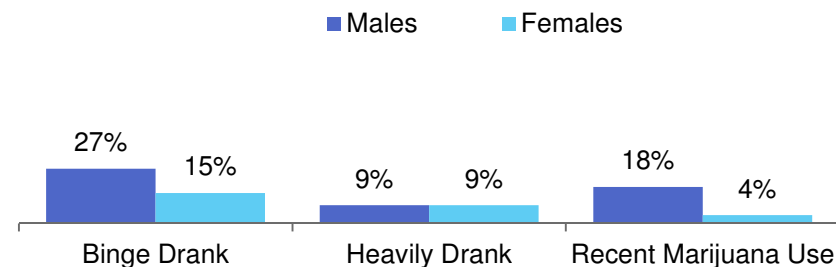
Morrisville area men are significantly more likely than women to report recently using marijuana (18% vs. 4%).

Binge drinking, heavy drinking and recent marijuana rates are all highest among Morrisville adults ages 18-44.

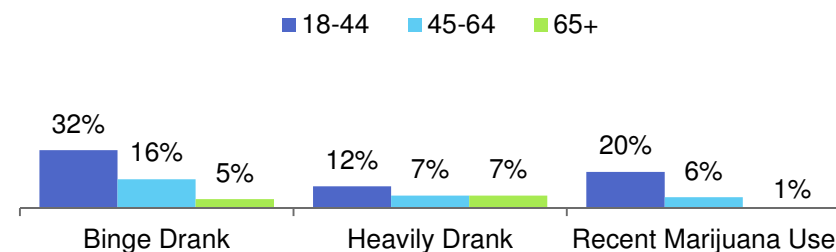
- All differences in binge drinking and marijuana use by age are statistically significant.
- Differences in heavy drinking do not vary statistically by age.

There are no significant differences by annual household income level in rates of binge drinking, heavy drinking, and recent marijuana use.

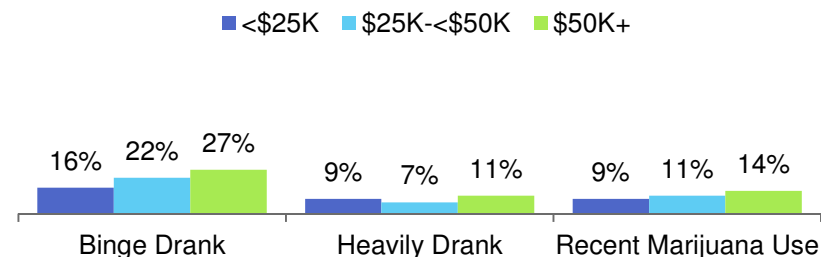
**Risk Behaviors by Gender  
Morrisville Adults**



**Risk Behaviors by Age**



**Risk Behaviors by Income Level**



\*Sample size is too small to report

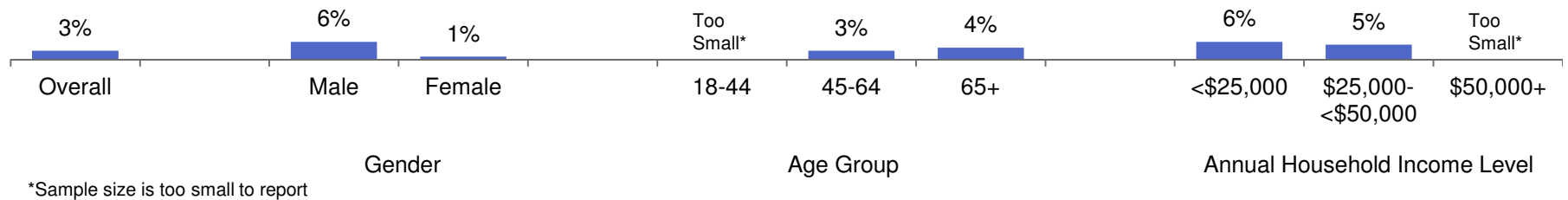
## Risk Behaviors

Overall, less than one in twenty (3%) adults in the Morrisville area said they seldom or never wear a seatbelt when riding or driving in a car. This is statistically similar to the four percent of Vermont adults who reported the same.

Morrisville area men are significantly more likely than women to not wear a seatbelt (6% vs. 1%).

Adult non-use of seatbelts in the Morrisville area does not differ by age or annual household income level.

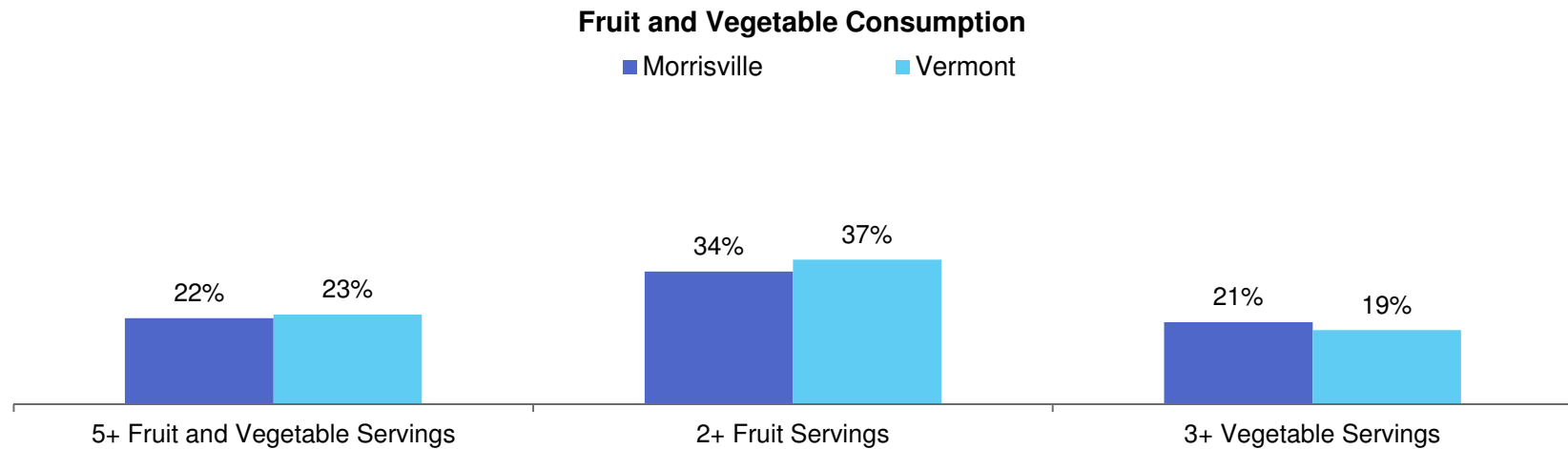
**Seldom or Never Wear Seatbelt, Overall and by Sub-groups  
Morrisville Adults**



## Preventive Behaviors

In 2011, less than a quarter of Morrisville area adults reported eating the recommended five or more fruit and vegetable servings per day. More than three in ten ate two or more fruits and 21% reported eating three or more vegetable servings.

Morrisville area adult consumption of fruits and vegetables is statistically similar to that among Vermont adults overall.

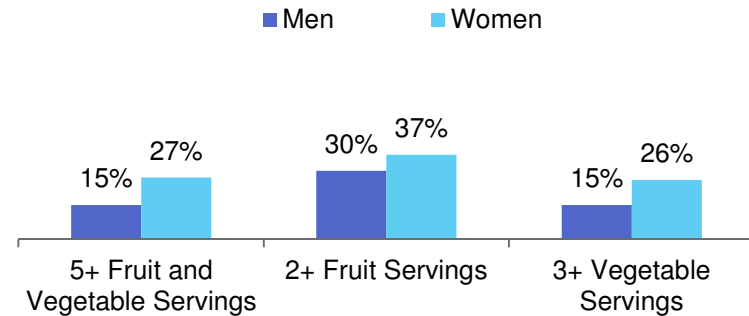


## Preventive Behaviors

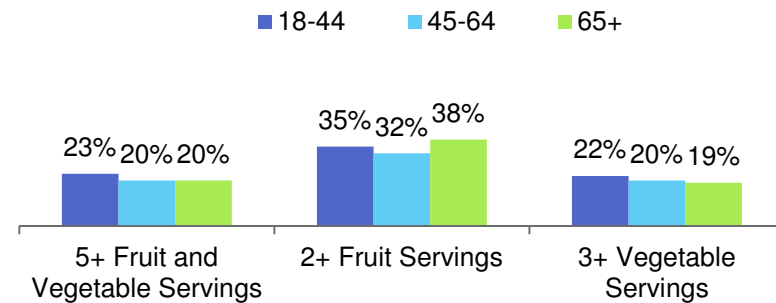
Women in the Morrisville area eat more fruits and vegetables than men. However, differences by gender are not statistically significant.

There are no differences in fruit and vegetable consumption by age or annual household income level, among Morrisville adults.

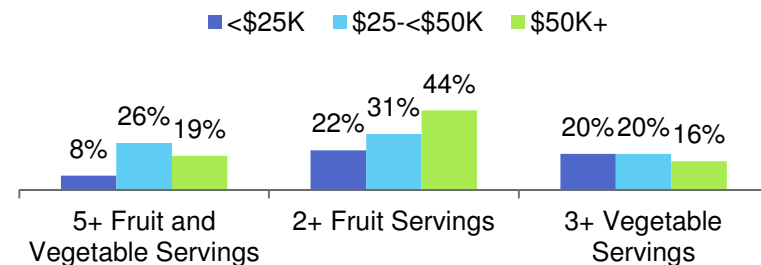
**Preventive Behaviors by Gender  
Morrisville Adults**



**Preventive Behaviors by Age**



**Preventive Behaviors by Income Level**



Note: fruit and vegetable data, except that by age is age adjusted to the U.S. 2000 standard population.

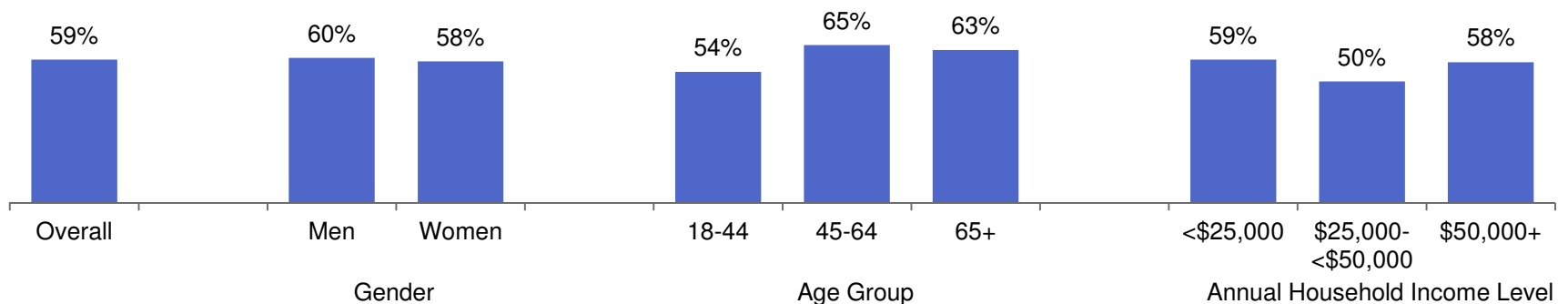
## Preventive Behaviors

In 2011, about six in ten (59%) Morrisville and Vermont adults reported meeting physical activity recommendations\*.

Men and women in the Morrisville area reported meeting physical activity recommendations at statistically similar rates, 60% for men and 58% for women.

Among Morrisville adults, there also are no significant differences in meeting physical activity recommendations by age or annual household income level.

**Met Physical Activity Recommendations, Overall and by Sub-groups  
Morrisville Adults**



\*For adults, the CDC currently recommends they participate in 150 minutes of moderate physical activity or 75 minutes of vigorous activity per week. Strength building activities are recommended at least two times per week. For more information see:

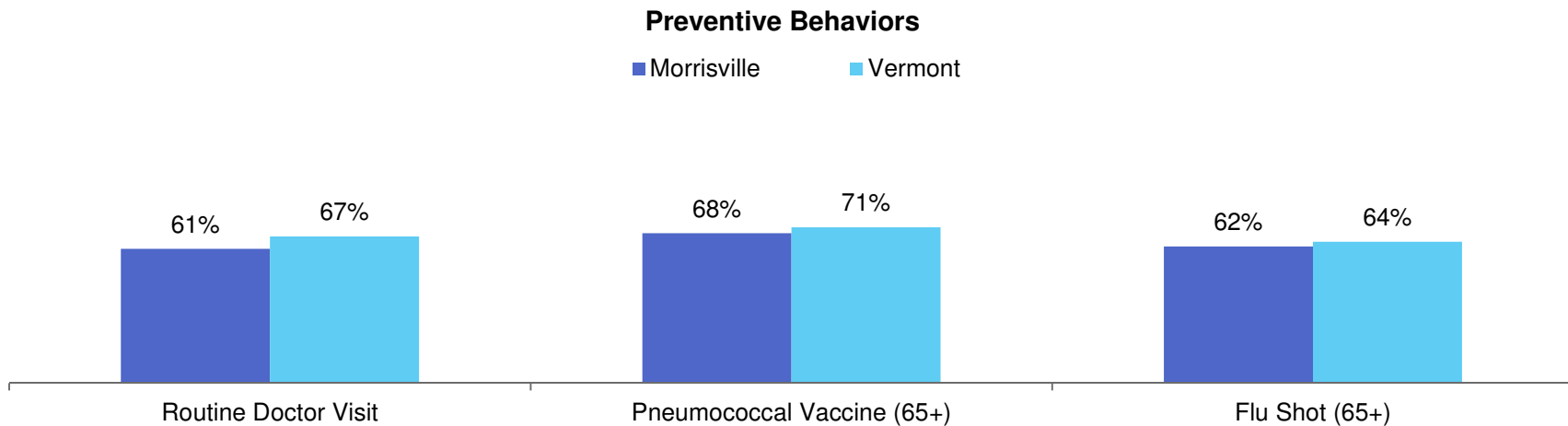
[www.cdc.gov/physicalactivity/everyone/guidelines/index.html](http://www.cdc.gov/physicalactivity/everyone/guidelines/index.html)

## Preventive Behaviors

About three in five adults in the Morrisville area said they saw their doctor for a routine visit in the previous year. This is statistically similar to the 67% reported among all Vermont adults.

More than two-thirds of Morrisville area adults ages 65 and older have ever gotten a pneumococcal vaccine. Fewer, 62% reported getting a flu shot in the last year.

- Vermont adults, ages 65 and older reported getting pneumococcal and flu shot vaccines at similar rates to Morrisville adults, 71% and 64%, respectively.



## Preventive Behaviors

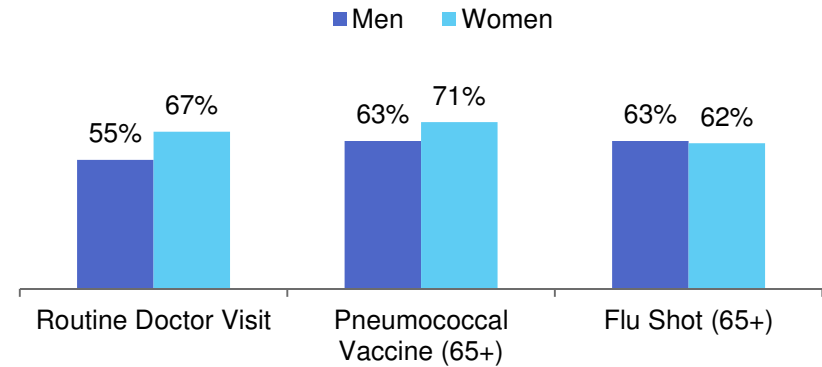
There are no statistical differences by gender in routine visits to a doctor, among Morrisville area adults. Men and women 65 and older also reported similar rates of annual flu shots and ever getting the pneumococcal vaccine.

Routine visits to the doctor in the last year increase with age.

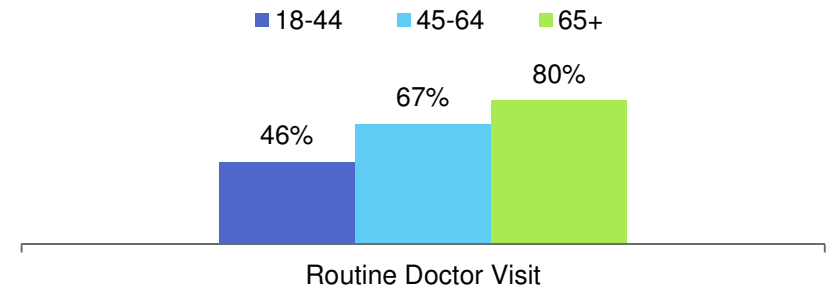
- All differences by age are statistically significant.

There are no differences, among Morrisville area adults, in the occurrence of routine doctor visits or receipt of vaccinations by annual household income level.

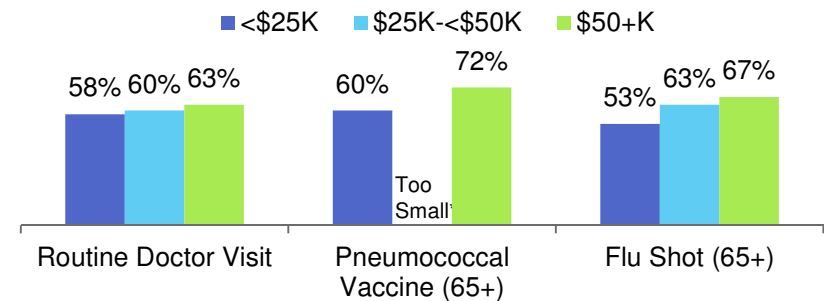
**Preventive Behaviors by Gender  
Morrisville Adults**



**Preventive Behaviors by Age**



**Preventive Behaviors by Gender**



\*Sample size is too small to report

## HIV Screening

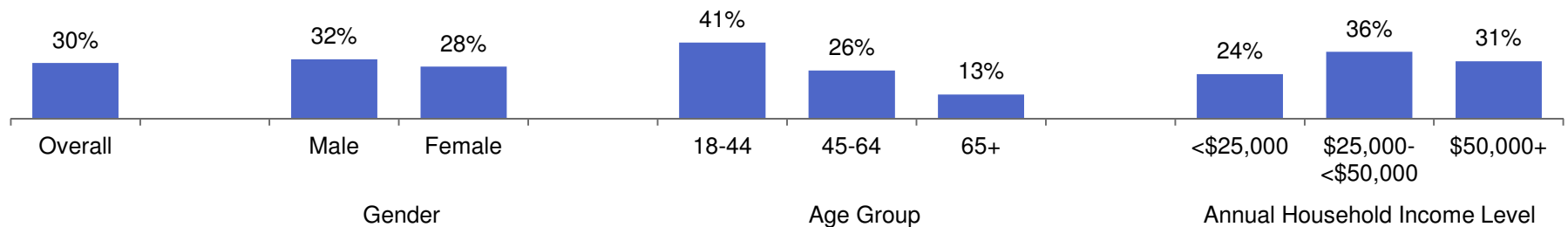
In 2011-2012, three in ten Morrisville area adults and Vermont adults overall had ever been tested for HIV.

Men and women in the Morrisville area report HIV testing at similar rates.

Ever having an HIV test decreases with increasing age, however, only the difference between adults 65 and older and younger adults is statistically significant.

There are no differences, among adults in the Morrisville area, in HIV testing by annual household income level.

**Ever Had HIV Test, Overall and by Sub-Groups  
Morrisville Adults**



## Cancer Screening

In 2012, three quarters of women ages 50-74 in the Morrisville area reported meeting breast cancer screening recommendations. This is the same rate reported among all Vermont women in this age group.

- The breast cancer screening recommendation is a mammogram every two years.

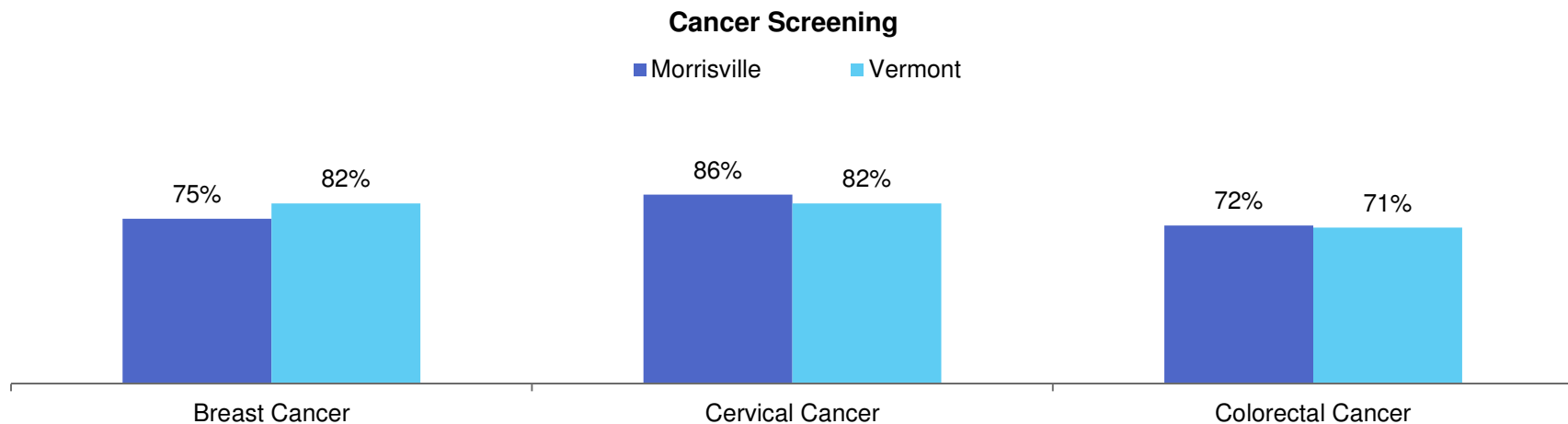
Eighty-six percent of women 21 and older who live in the Morrisville area met cervical cancer recommendations, statistically similar to the 82% among Vermont women of the same age.

- Cervical cancer screening recommendations are for a PAP test every three years, and excludes women who have had a hysterectomy.

Among adults 50 to 75 living in the Morrisville area, more than seven in ten (72%) met colorectal cancer screening recommendations. This is significantly lower than the rate reported by all Vermonters of the same age (71%).

- Recommendations for screening for colorectal cancer are: a fecal occult blood test (FOBT) annually OR sigmoidoscopy ever five years and FOBT every three years OR colonoscopy ever ten years.

Data on cancer screenings are not broken out by subgroup as the screening recommendations are already limited by age and/or gender.



## Community Safety and Resources

More than six in ten (62%) Morrisville area adults said they use community resources for physical activity (e.g. parks, playgrounds and sports fields). Statistically, this is similar to the rate reported among Vermont adults overall (58%).

Men and women in the Morrisville area use physical activity community resources at similar rates.

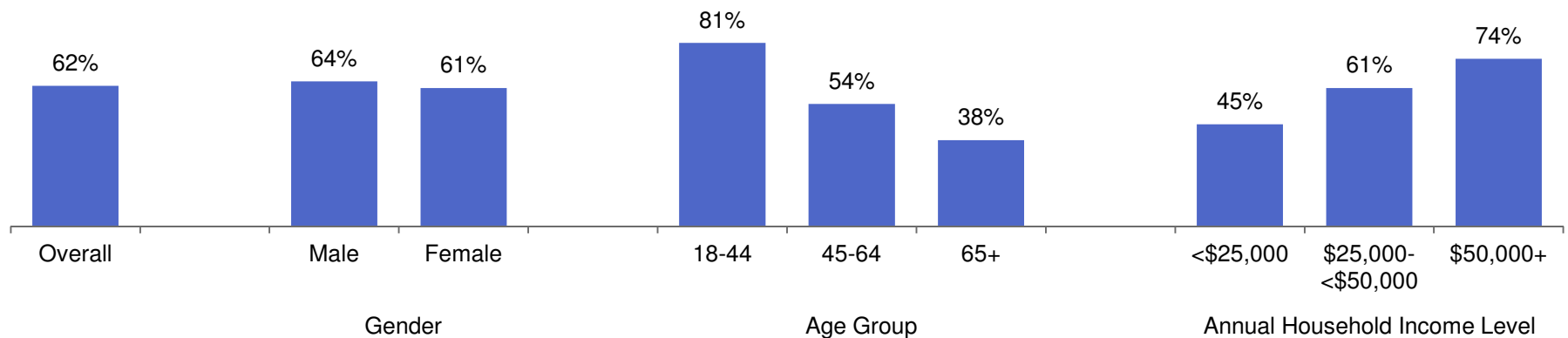
Use of community resources for physical activity decreases with increasing age.

- All differences by age are statistically significant.

Morrisville area adults' use of community resources for physical activity increases with increasing annual household income level.

- Adults in homes making \$50,000 or more annually are significantly more likely to use community resources for physical activity than those in homes making less than \$25,000 (74% vs. 45%).

**Use Community Resources for Physical Activity, Overall and by Sub-Groups  
Morrisville Adults**



## Additional Information

Contact the BRFSS Coordinator for additional information or for BRFSS data

Jessie Hammond

[Jessie.hammond@state.vt.us](mailto:Jessie.hammond@state.vt.us)

802-863-7663

Additional sub-state level data can be found on the Vermont Department of Health website

<http://healthvermont.gov/hv2020/index.aspx>

Towns included in the Morrisville Health District are: Hardwick, Stannard, Belvidere, Cambridge, Eden, Elmore, Hyde Park, Johnson, Morristown, Stowe, Waterville, Wolcott, Craftsbury, Greensboro, and Woodbury.